

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Committee To Reelect Congressman Chris Smith

ADDRESS (number and street)

P.O. Box 3184

Check if different
than previously
reported. (ACC)

Hamilton

NJ

08619

2. FEC IDENTIFICATION NUMBER ▼

C

C00096412

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NJ

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mary M. Roldan

Signature of Treasurer

Mary M. Roldan

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 44

Write or Type Committee Name

Committee To Reelect Congressman Chris Smith

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 1 | | 2 | 0 | 1 | 3 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 3 | 1 | | 2 | 0 | 1 | 3 |

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 39146.33 | 210914.58 |
| (b) Total Contribution Refunds (from Line 20(d)) | 900.00 | 8850.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 38246.33 | 202064.58 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 23054.72 | 144708.29 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.12 | 545.10 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 23054.60 | 144163.19 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 272739.50 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Committee To Reelect Congressman Chris Smith

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 1 | | 2 | 0 | 1 | 3 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 3 | 1 | | 2 | 0 | 1 | 3 |

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

10800.00

76594.00

(ii) Unitemized.....

22346.33

76420.58

(iii) TOTAL of contributions from individuals ▶

33146.33

153014.58

(b) Political Party Committees.....

0.00

350.00

(c) Other Political Committees (such as PACs).....

6000.00

57550.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

39146.33

210914.58

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.12

545.10

15. OTHER RECEIPTS (Dividends, Interest, etc.)

85.71

324.63

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

39232.16

211784.31

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 44

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 23054.72 | 144708.29 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 900.00 | 8850.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 900.00 | 8850.00 |
| 21. OTHER DISBURSEMENTS | 2910.00 | 1710.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 26864.72 | 155268.29 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 260372.06 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 39232.16 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 299604.22 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 26864.72 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 272739.50 |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Meredith Berg

Mailing Address 914 Sallys Alley N

City

Hudson

State

WI

Zip Code

54016-1176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

310.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40103.C58342

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

Hugh Bergman

Mailing Address 6317 Murdoch Ave

City

Saint Louis

State

MO

Zip Code

63109-2707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 10 | | 2013 |

Transaction ID : 31010.C57866

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

Hugh Bergman

Mailing Address 6317 Murdoch Ave

City

Saint Louis

State

MO

Zip Code

63109-2707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 40103.C58274

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

300.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Gilbert Bilodeau**A.**

Mailing Address 340 Wychwood Rd.

City

Westfield

State

NJ

Zip Code

07090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 11 | | 2013 |

Transaction ID : 31015.C57886

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

Gilbert Bilodeau**B.**

Mailing Address 340 Wychwood Rd.

City

Westfield

State

NJ

Zip Code

07090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 31230.C58241

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

Albert Calfano**C.**

Mailing Address 160 Hempstead Rd

City

Trenton

State

NJ

Zip Code

08610-1035

FEC ID number of contributing
federal political committee.

C

Name of Employer

NJ Manufactures, Ins.

Occupation

Underwriter

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 23 | | 2013 |

Transaction ID : 31223.C58167

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

450.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Eileen Carbone

Mailing Address 53 Wolf Drive

City

Trenton

State

NJ

Zip Code

08610-1122

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACV, LLC

Occupation

Bookkeeper

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40105.C58384

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

Chuck Casagrande

Mailing Address 219 Tuttle Avenue

City

Spring Lake

State

NJ

Zip Code

07762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Danskin Agency

Occupation

Insurance Agent

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 28 | | 2013 |

Transaction ID : 31103.C58027

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

Peter Cass

Mailing Address 25 Highpoint

City

Cedar Grove

State

NJ

Zip Code

07009-1976

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 40103.C58272

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

1200.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Margaret Cleary

Mailing Address 1049 State Route 27

City

Somerset

State

NJ

Zip Code

08873-5014

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Exec

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 02 | | 2013 |

Transaction ID : 31202.C58114

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

B. Margaret Cleary

Mailing Address 1049 State Route 27

City

Somerset

State

NJ

Zip Code

08873-5014

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Exec

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 40103.C58270

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

C. Richard Creter

Mailing Address 24 Timberwick Drive

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing federal political committee.

C

Name of Employer

Creter Vault Company

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40103.C58340

Amount of Each Receipt this Period

1000.00

Receipt

1450.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Marian Cross

Mailing Address 46 Taylor Terrace

City

Hopewell

State

NJ

Zip Code

08525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 23 | | 2013 |

Transaction ID : 31223.C58164

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

Carol Crossed

Mailing Address 1675 Clover Street

City

Rochester

State

NY

Zip Code

14618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Susan B. Anthony Museum

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | | 04 | | 2013 |

Transaction ID : 31104.C58073

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

Carol Crossed

Mailing Address 1675 Clover Street

City

Rochester

State

NY

Zip Code

14618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Susan B. Anthony Museum

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 40103.C58268

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Steven DeChiaro

Mailing Address 231 Verdant Court

City

Freehold

State

NJ

Zip Code

07728

FEC ID number of contributing
federal political committee.

C

Name of Employer

DSCI

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40103.C58341

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

John Eccleston

Mailing Address 32 Devereax Drive

City

Whiting

State

NJ

Zip Code

08759

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 23 | | 2013 |

Transaction ID : 31223.C58173

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

Kathleen Finnegan

Mailing Address 23335 570th Ave

City

Austin

State

MN

Zip Code

55912-6422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | | 18 | | 2013 |

Transaction ID : 31118.C58089

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Jane Furlong

Mailing Address 495-C Thornbury Court

City

Lakewood

State

NJ

Zip Code

08701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 06 | | 2013 |

Transaction ID : 31007.C57716

Amount of Each Receipt this Period

150.00

Receipt

Full Name (Last, First, Middle Initial)

B. John Gagliano

Mailing Address 33 Haddon Park

City

Fair Haven

State

NJ

Zip Code

07704

FEC ID number of contributing
federal political committee.

C

Name of Employer

EPS

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 11 | | 2013 |

Transaction ID : 31015.C57888

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

C. Tom Gagliano

Mailing Address 63 Ambassador Drive

City

Red Bank

State

NJ

Zip Code

07701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 06 | | 2013 |

Transaction ID : 31007.C57714

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Mr. Randall Gerard

Mailing Address 3028 Oliver St. NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Podesta Group

Occupation

Lobbyist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40103.C58339

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

B. Barry Goldman

Mailing Address 20 Pal Drive

City

Asbury Park

State

NJ

Zip Code

07712-2552

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 40103.C58269

Amount of Each Receipt this Period

300.00

Receipt

Full Name (Last, First, Middle Initial)

C. William Grundy

Mailing Address 3262 Susquehanna Rd

City

Dresher

State

PA

Zip Code

19025-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 31230.C58243

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Laura Herlihy**A.**

Mailing Address 31 Garryford Drive

City

Middletown

State

NJ

Zip Code

07748

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 21 | | 2013 |

Transaction ID : 31021.C57965

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

John Keane**B.**

Mailing Address 33 Ellsworth Ave

City

Staten Island

State

NY

Zip Code

10312-2501

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 31230.C58251

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

John Leonard**C.**

Mailing Address 1531 Toboggan Run

City

Manasquan

State

NJ

Zip Code

08736

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 23 | | 2013 |

Transaction ID : 31223.C58169

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Walter Lyon

Mailing Address 120 Palm Bay Drive, Apt. A

City

West Palm Beach

State

FL

Zip Code

33418-5792

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 11 | | 18 | | 2013 |

Transaction ID : 31118.C58088

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

Jean McDermott

Mailing Address 37 Thornton Street

City

Hillsborough

State

NJ

Zip Code

08844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 31230.C58247

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

Patricia Morris

Mailing Address 146 Mount Horeb Rd.

City

Warren

State

NJ

Zip Code

07059-5545

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 07 | | 2013 |

Transaction ID : 31007.C57806

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Anne OConnor

Mailing Address 1103 Magnolia Avenue

City

Sea Girt

State

NJ

Zip Code

08750

FEC ID number of contributing
federal political committee.

C

Name of Employer
OConnor & OConnorOccupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 11 | | 18 | | 2013 |

Transaction ID : 31118.C58090

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

B. John Olsen

Mailing Address 164 Manorside Drive

City

Brick

State

NJ

Zip Code

08724-4726

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 23 | | 2013 |

Transaction ID : 31223.C58168

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

C. Harry Paalberg

Mailing Address 1547 Logan Drive

City

Manasquan

State

NJ

Zip Code

08736-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boeing Co.Occupation
Engineer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 10 | | 2013 |

Transaction ID : 31010.C57838

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Paul Pisano

A.

Mailing Address 3701 Templeton Place

City

Alexandria

State

VA

Zip Code

22304

FEC ID number of contributing
federal political committee.

C

Name of Employer

NBWA

Occupation

Sr.VP & Counsel

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 31230.C58240

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

Arthur Potter

B.

Mailing Address 717 Wall Road

City

Spring Lake

State

NJ

Zip Code

07762-2264

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 21 | | 2013 |

Transaction ID : 31021.C57962

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

Tom Powers

C.

Mailing Address 136 South Manor Ct.

City

Wall

State

NJ

Zip Code

07710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 40103.C58280

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 44

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Howard Preville**A.**Mailing Address Channel Club Tower
1614 Channel Drive

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Monmouth Beach | NJ | 07750 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of NJOccupation
Healthcare Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | | 04 | | 2013 |

Transaction ID : 31104.C58074

Amount of Each Receipt this Period

150.00

Receipt

Full Name (Last, First, Middle Initial)

Do Que**B.**

Mailing Address 3826 Carrera Court

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| San Jose | CA | 95148 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 40103.C58298

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

Stephen Rademaker**C.**

Mailing Address 1620 Brookside Road

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Mc Lean | VA | 22101 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Podesta GroupOccupation
Principal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 02 | | 2013 |

Transaction ID : 31002.C57566

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

David Rivkin

A.

Mailing Address 35 Ward Avenue

City

Rumson

State

NJ

Zip Code

07760

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | | 04 | | 2013 |

Transaction ID : 31104.C58072

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

Robert Shalhoub

B.

Mailing Address 9325 Sibelius Dr

City

Vienna

State

VA

Zip Code

22182-1632

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 40103.C58283

Amount of Each Receipt this Period

50.00

Receipt

Full Name (Last, First, Middle Initial)

Nancy Singer

C.

Mailing Address 9 Sugarwood Way

City

Warren

State

NJ

Zip Code

07059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : 31230.C58242

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Thomas Sollas

A.

Mailing Address 79 Bay Point Harbour

City

Point Pleasant

State

NJ

Zip Code

08742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40105.C58385

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

Edward Thomson

B.

Mailing Address 1212 Candlewood Lane

City

Sea Girt

State

NJ

Zip Code

08750

FEC ID number of contributing
federal political committee.

C

Name of Employer

EH Thomson & Comp, Inc.

Occupation

Actuary

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40103.C58363

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

Charles Trenkle

C.

Mailing Address PO Box 12655

City

Huntsville

State

AL

Zip Code

35815-2655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 15 | | 2013 |

Transaction ID : 31015.C57907

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Charles Trenkle

Mailing Address PO Box 12655

City

Huntsville

State

AL

Zip Code

35815-2655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 18 | | 2013 |

Transaction ID : 31118.C58092

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

Charles Trenkle

Mailing Address PO Box 12655

City

Huntsville

State

AL

Zip Code

35815-2655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40103.C58364

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

11050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 44

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

AFSCME PAC

Mailing Address Attn: Chuck Loveless

1625 L Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
12 30 2013

Transaction ID : 31230.C58239

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

Air Line Pilots Assn. PAC

Mailing Address Attn: Zach Mooneyham, PAC Events

1625 Massachusetts Ave. NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 20 2013

Transaction ID : 31223.C58135

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

American Foreign Service Assn. PAC

Mailing Address Mr.David N. Murimi, PAC Coordinato

2101 E Street, NW

City

Washington

State

DC

Zip Code

20037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 02 2013

Transaction ID : 31202.C58113

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 44

| | | | | |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

BUILD PAC - Natl Assn of Home Builders

Mailing Address Attn: Jessica Hill, Govt Affairs

1201 15th St., NW

City

Washington

State

DC

Zip Code

20005-2800

FEC ID number of contributing
federal political committee.

C

Name of Employer
lenguy@verizon.net

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 10 / 2013

Transaction ID : 31210.C58130

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

Eli Lilly & Company PAC

Mailing Address Ms. Sonya Sontag Elling, Sr. Dir. G

555 12th street, NW

City

Washington

State

DC

Zip Code

20004-1205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 02 / 2013

Transaction ID : 31202.C58112

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

PEGPAC

Mailing Address 80 Park Plaza

City

Newark

State

NJ

Zip Code

07102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2013

Transaction ID : 31015.C57906

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

6000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 44

(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input checked="" type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

Roma Bank**A.**

Mailing Address 2300 Route 33

City

Robbinsville

State

NJ

Zip Code

08691-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

204.51

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 31 | | 2013 |

Transaction ID : 31209.C58127

Amount of Each Receipt this Period

22.29

Other Receipt

NOTE:BANK INTEREST

Full Name (Last, First, Middle Initial)

Roma Bank**B.**

Mailing Address 2300 Route 33

City

Robbinsville

State

NJ

Zip Code

08691-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

226.06

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | | 30 | | 2013 |

Transaction ID : 40106.C58405

Amount of Each Receipt this Period

21.55

Other Receipt

NOTE:BANK INTEREST

Full Name (Last, First, Middle Initial)

Roma Bank**C.**

Mailing Address 2300 Route 33

City

Robbinsville

State

NJ

Zip Code

08691-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

267.93

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2013 |

Transaction ID : 40115.C58495

Amount of Each Receipt this Period

41.87

Other Receipt

NOTE:BANK INTEREST

SUBTOTAL of Receipts This Page (optional).....

85.71

TOTAL This Period (last page this line number only).....

85.71

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Avenue, S.W.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
credit card processing fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 04 | | 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 16.25 |
|-------|

Transaction ID : 31007.E6462

CREDIT CARD PROCESSING FEE

B. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Avenue, S.W.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
credit card processing fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 11 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 110.75 |
|--------|

Transaction ID : 31209.E6518

CREDIT CARD PROCESSING FEE

C. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Avenue, S.W.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
credit card processing fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 01 | | 2013 |

Amount of Each Disbursement this Period

| |
|------|
| 8.75 |
|------|

Transaction ID : 31104.E6474

CREDIT CARD PROCESSING FEE

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|--------|
| 135.75 |
|--------|

| |
|--|
| |
|--|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Avenue, S.W.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
credit card processing fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 02 | | 2013 |

Amount of Each Disbursement this Period

| |
|------|
| 2.50 |
|------|

Transaction ID : 31209.E6517

CREDIT CARD PROCESSING FEE

B. Chase Card Services

Mailing Address PO Box 15153

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Wilmington | DE | 19886- |

Purpose of Disbursement
CREDIT CARD:SEE BELOW

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 03 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1243.55 |
|---------|

Transaction ID : 30927.E6452

CREDIT CARD:SEE BELOW

C. AT&T Wireless

Mailing Address P.O. Box 8220

| | | |
|--------|-------|------------|
| City | State | Zip Code |
| Aurora | IL | 60572-8220 |

Purpose of Disbursement
cell phone 2620

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 03 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 115.75 |
|--------|

Transaction ID : 30927.E6453

[MEMO ITEM]

MEMO: CELL PHONE 2620

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1246.05

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Postmaster--MAIN Route 130

Mailing Address Route 130 South

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 03 | | 2013 |

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Trenton | NJ | 08691- |

Amount of Each Disbursement this Period

| |
|--------|
| 138.00 |
|--------|

Purpose of Disbursement
postageCategory/
Type

Transaction ID : 30927.E6455

[MEMO ITEM]

MEMO: POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Charlie Palmer Steak House

Mailing Address 101 Constitution Ave.

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 03 | | 2013 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20001- |

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Purpose of Disbursement
deposit for event/cateringCategory/
Type

Transaction ID : 30927.E6456

[MEMO ITEM]

MEMO: DEPOSIT FOR EVENT/CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Staples-Hamilton Market Place

Mailing Address

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 03 | | 2013 |

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Trenton | NJ | 08691- |

Amount of Each Disbursement this Period

| |
|--------|
| 120.12 |
|--------|

Purpose of Disbursement
office suppliesCategory/
Type

Transaction ID : 30927.E6457

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. AR&C Self Storage

Mailing Address 1 Back Creek Way

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Trenton | NJ | 08691- |

Purpose of Disbursement
storage facility-Sept

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 03 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 2122.97 |
|---------|

Transaction ID : 30927.E6458

[MEMO ITEM]

MEMO: STORAGE FACILITY-SEPT

B. Chase Card Services

Mailing Address PO Box 15153

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Wilmington | DE | 19886- |

Purpose of Disbursement
CREDIT CARD:SEE BELOW

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 01 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 2122.97 |
|---------|

Transaction ID : 31104.E6475

CREDIT CARD:SEE BELOW

C. AT&T Wireless

Mailing Address P.O. Box 8220

| | | |
|--------|-------|------------|
| City | State | Zip Code |
| Aurora | IL | 60572-8220 |

Purpose of Disbursement
cell phone 2620

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 01 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 115.75 |
|--------|

Transaction ID : 31104.E6478

[MEMO ITEM]

MEMO: CELL PHONE 2620

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2122.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Icontact Corporation

Mailing Address 2635 Meridian Parkway, Ste 200

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Durham | NC | 27713- |

Purpose of Disbursement
email marketing

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 11 / 01 / 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 62.90 |
|-------|

Transaction ID : 31104.E6479

[MEMO ITEM]

MEMO: EMAIL MARKETING

B. Register.com

Mailing Address 12808 Gran Bay Parkway West

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Jacksonville | FL | 32258- |

Purpose of Disbursement
hosting domain names renewal

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 11 / 01 / 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 313.00 |
|--------|

Transaction ID : 31104.E6481

[MEMO ITEM]

MEMO: HOSTING DOMAIN NAMES RENEWAL

C. Charlie Palmer Steak House

Mailing Address 101 Constitution Ave.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20001- |

Purpose of Disbursement
event cost/catering

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 11 / 01 / 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 919.35 |
|--------|

Transaction ID : 31104.E6484

[MEMO ITEM]

MEMO: EVENT COST/CATERING

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 0.00 |
|------|

| |
|--|
| |
|--|

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 OF 44

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Charlie Palmer Steak House

Mailing Address 101 Constitution Ave.

City Washington State DC Zip Code 20001-

Purpose of Disbursement
parking

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 01 / 2013

Amount of Each Disbursement this Period

23.00

Transaction ID : 31104.E6485

[MEMO ITEM]

MEMO: PARKING

Full Name (Last, First, Middle Initial)

B. Icontact Corporation

Mailing Address 2635 Meridian Parkway, Ste 200

City Durham State NC Zip Code 27713-

Purpose of Disbursement
email marketing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 01 / 2013

Amount of Each Disbursement this Period

62.90

Transaction ID : 31104.E6487

[MEMO ITEM]

MEMO: EMAIL MARKETING

Full Name (Last, First, Middle Initial)

c. AR&C Self Storage

Mailing Address 1 Back Creek Way

City Trenton State NJ Zip Code 08691-

Purpose of Disbursement
storage facility

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 01 / 2013

Amount of Each Disbursement this Period

175.99

Transaction ID : 31104.E6489

[MEMO ITEM]

MEMO: STORAGE FACILITY

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Bullfeathers

Mailing Address 410 1st Street SE

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
campaign dinner expense

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 01 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 189.50 |
|--------|

Transaction ID : 31104.E6490

[MEMO ITEM]

MEMO: CAMPAIGN DINNER EXPENSE

B. Chase Card Services

Mailing Address PO Box 15153

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Wilmington | DE | 19886- |

Purpose of Disbursement
CREDIT CARD:SEE BELOW

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 03 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1324.53 |
|---------|

Transaction ID : 31209.E6503

CREDIT CARD:SEE BELOW

C. Bullfeathers

Mailing Address 410 1st Street SE

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
lunch expense

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 03 | | 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 98.23 |
|-------|

Transaction ID : 31209.E6504

[MEMO ITEM]

MEMO: LUNCH EXPENSE

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|---------|
| 1324.53 |
|---------|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. AT&T Wireless

Mailing Address P.O. Box 8220

| | | |
|--------|-------|------------|
| City | State | Zip Code |
| Aurora | IL | 60572-8220 |

Purpose of Disbursement
cell phone 2620

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 03 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 120.20 |
|--------|

Transaction ID : 31209.E6505

[MEMO ITEM]

MEMO: CELL PHONE 2620

B. Icontact Corporation

Mailing Address 2635 Meridian Parkway, Ste 200

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Durham | NC | 27713- |

Purpose of Disbursement
email marketing

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 03 | | 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 62.90 |
|-------|

Transaction ID : 31209.E6506

[MEMO ITEM]

MEMO: EMAIL MARKETING

C. Postmaster - Trenton

Mailing Address Route 33

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Trenton | NJ | 08650-9616 |

Purpose of Disbursement
postage

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 03 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 552.00 |
|--------|

Transaction ID : 31209.E6507

[MEMO ITEM]

MEMO: POSTAGE

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Staples-Hamilton Market Place

Mailing Address

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 03 | | 2013 |

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Trenton | NJ | 08691- |

Amount of Each Disbursement this Period

| |
|--------|
| 173.29 |
|--------|

Purpose of Disbursement
office suppliesCategory/
Type

Transaction ID : 31209.E6508

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Full Name (Last, First, Middle Initial)

B. AR&C Self Storage

Mailing Address 1 Back Creek Way

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 03 | | 2013 |

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Trenton | NJ | 08691- |

Amount of Each Disbursement this Period

| |
|--------|
| 188.83 |
|--------|

Purpose of Disbursement
storage facilityCategory/
Type

Transaction ID : 31209.E6509

[MEMO ITEM]

MEMO: STORAGE FACILITY

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address P.O. Box 371461

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 12 | | 2013 |

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Pittsburgh | PA | 15250-7461 |

Amount of Each Disbursement this Period

| |
|-------|
| 57.80 |
|-------|

Purpose of Disbursement
courierCategory/
Type

Transaction ID : 31223.E6520

COURIER

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|-------|
| 57.80 |
|-------|

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Minuteman Press

Mailing Address 2100 Nottingham Way

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Trenton | NJ | 08619- |

Purpose of Disbursement
printing and mailing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 31 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 5605.12 |
|---------|

Transaction ID : 31103.E6473

PRINTING AND MAILING

B. Minuteman Press

Mailing Address 2100 Nottingham Way

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Trenton | NJ | 08619- |

Purpose of Disbursement
postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 16 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 2285.03 |
|---------|

Transaction ID : 31223.E6522

POSTAGE

c. Paychex, Inc.

Mailing Address PO Box 387

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
fees for payroll services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 11 | | 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 75.73 |
|-------|

Transaction ID : 31008.E6466

FEES FOR PAYROLL SERVICES

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7965.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.

Mailing Address PO Box 387

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
payroll taxes impounded

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 11 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 417.27 |
|--------|

Transaction ID : 31008.E6465

PAYROLL TAXES IMPOUNDED

B. Paychex, Inc.

Mailing Address PO Box 387

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
fees for payrolls services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 25 | | 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 67.23 |
|-------|

Transaction ID : 31103.E6472

FEES FOR PAYROLLS SERVICES

C. Paychex, Inc.

Mailing Address PO Box 387

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
payroll taxes impounded

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 25 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 417.28 |
|--------|

Transaction ID : 31103.E6471

PAYROLL TAXES IMPOUNDED

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

901.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.

Mailing Address PO Box 387

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 08 | | 2013 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
fees for payroll services

Amount of Each Disbursement this Period

| |
|-------|
| 67.23 |
|-------|

Transaction ID : 31118.E6494

Candidate Name

Category/
Type

| | | | |
|----------------|-----------|-------------------|---|
| Office Sought: | House | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| | Senate | | |
| | President | | |

State: District:

FEES FOR PAYROLL SERVICES

Full Name (Last, First, Middle Initial)

B. Paychex, Inc.

Mailing Address PO Box 387

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 08 | | 2013 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
payroll taxes impounded

Amount of Each Disbursement this Period

| |
|--------|
| 417.28 |
|--------|

Transaction ID : 31118.E6493

Candidate Name

Category/
Type

| | | | |
|----------------|-----------|-------------------|---|
| Office Sought: | House | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| | Senate | | |
| | President | | |

State: District:

PAYROLL TAXES IMPOUNDED

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.

Mailing Address PO Box 387

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 22 | | 2013 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
fees for payroll services

Amount of Each Disbursement this Period

| |
|-------|
| 67.23 |
|-------|

Transaction ID : 31126.E6501

Candidate Name

Category/
Type

| | | | |
|----------------|-----------|-------------------|---|
| Office Sought: | House | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| | Senate | | |
| | President | | |

State: District:

FEES FOR PAYROLL SERVICES

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

551.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.

Mailing Address PO Box 387

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
payroll taxes impounded

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 22 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 406.51 |
|--------|

Transaction ID : 31126.E6500

PAYROLL TAXES IMPOUNDED

B. Paychex, Inc.

Mailing Address PO Box 387

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
fees for payroll services

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 06 | | 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 67.23 |
|-------|

Transaction ID : 31209.E6514

FEES FOR PAYROLL SERVICES

c. Paychex, Inc.

Mailing Address PO Box 387

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Purpose of Disbursement
payroll taxes impounded

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 06 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 388.69 |
|--------|

Transaction ID : 31209.E6515

PAYROLL TAXES IMPOUNDED

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

862.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.

Mailing Address PO Box 387

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 20 | 2013 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Amount of Each Disbursement this Period

| |
|--------|
| 388.69 |
|--------|

Purpose of Disbursement
payroll taxes impounded**Transaction ID : 31223.E6524**

Candidate Name

Category/
Type

| | | |
|----------------|-----------|---|
| Office Sought: | House | Disbursement For: |
| | Senate | |
| | President | |
| State: | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | | <input type="checkbox"/> Other (specify) |

PAYROLL TAXES IMPOUNDED

Full Name (Last, First, Middle Initial)

B. Paychex, Inc.

Mailing Address PO Box 387

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 20 | 2013 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Marlton | NJ | 08053-0387 |

Amount of Each Disbursement this Period

| |
|-------|
| 67.23 |
|-------|

Purpose of Disbursement
fees for payroll services**Transaction ID : 31223.E6523**

Candidate Name

Category/
Type

| | | |
|----------------|-----------|---|
| Office Sought: | House | Disbursement For: |
| | Senate | |
| | President | |
| State: | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | | <input type="checkbox"/> Other (specify) |

FEES FOR PAYROLL SERVICES

Full Name (Last, First, Middle Initial)

C. Postmaster--MAIN Route 130

Mailing Address Route 130 South

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 12 | 2013 |

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Trenton | NJ | 08691- |

Amount of Each Disbursement this Period

| |
|--------|
| 400.00 |
|--------|

Purpose of Disbursement
replenish BRE account**Transaction ID : 31223.E6521**

Candidate Name

Category/
Type

| | | |
|----------------|-----------|---|
| Office Sought: | House | Disbursement For: |
| | Senate | |
| | President | |
| State: | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | | <input type="checkbox"/> Other (specify) |

REPLENISH BRE ACCOUNT

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

855.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Mary Roldan

Mailing Address 146 Prospect Avenue

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Yardville | NJ | 08620- |

Purpose of Disbursement
payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 11 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1007.47 |
|---------|

Transaction ID : 31008.E6464

PAYROLL

Full Name (Last, First, Middle Initial)

B. Mary Roldan

Mailing Address 146 Prospect Avenue

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Yardville | NJ | 08620- |

Purpose of Disbursement
payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 25 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1007.46 |
|---------|

Transaction ID : 31103.E6470

PAYROLL

Full Name (Last, First, Middle Initial)

c. Mary Roldan

Mailing Address 146 Prospect Avenue

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Yardville | NJ | 08620- |

Purpose of Disbursement
payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 08 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1007.46 |
|---------|

Transaction ID : 31118.E6492

PAYROLL

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3022.39

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Mary Roldan

Mailing Address 146 Prospect Avenue

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Yardville | NJ | 08620- |

Purpose of Disbursement
payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 22 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1011.92 |
|---------|

Transaction ID : 31126.E6499

PAYROLL

Full Name (Last, First, Middle Initial)

B. Mary Roldan

Mailing Address 146 Prospect Avenue

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Yardville | NJ | 08620- |

Purpose of Disbursement
payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 06 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1019.04 |
|---------|

Transaction ID : 31209.E6516

PAYROLL

Full Name (Last, First, Middle Initial)

c. Mary Roldan

Mailing Address 146 Prospect Avenue

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Yardville | NJ | 08620- |

Purpose of Disbursement
payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 20 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1019.04 |
|---------|

Transaction ID : 31223.E6525

PAYROLL

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3050.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Jeff Sagnip

Mailing Address

City State Zip Code

Purpose of Disbursement
reimbursement for lunch expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 23 | | 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 42.00 |
|-------|

Transaction ID : 31103.E6469

REIMBURSEMENT FOR LUNCH EXPENSE

B. Jeff Sagnip

Mailing Address

City State Zip Code

Purpose of Disbursement
reimbursement for travel/food expen

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 08 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 175.00 |
|--------|

Transaction ID : 31118.E6491

REIMBURSEMENT FOR TRAVEL/FOOD EXPEN

c. Verizon

Mailing Address PO Box 4833

City State Zip Code
Trenton NJ 08650-4833Purpose of Disbursement
phone 0787

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 15 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 143.07 |
|--------|

Transaction ID : 31015.E6467

PHONE 0787

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

360.07

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 4833

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 20 | | 2013 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Trenton | NJ | 08650-4833 |

Amount of Each Disbursement this Period

| |
|--------|
| 142.86 |
|--------|

Purpose of Disbursement
phone 0787Category/
Type**Transaction ID : 31126.E6497**

Candidate Name

PHONE 0787

| | | |
|----------------|-----------|---|
| Office Sought: | House | Disbursement For: |
| | Senate | |
| | President | |
| State: | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address PO Box 4833

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 12 | | 2013 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Trenton | NJ | 08650-4833 |

Amount of Each Disbursement this Period

| |
|--------|
| 142.59 |
|--------|

Purpose of Disbursement
phone 0787Category/
Type**Transaction ID : 31223.E6519**

Candidate Name

PHONE 0787

| | | |
|----------------|-----------|---|
| Office Sought: | House | Disbursement For: |
| | Senate | |
| | President | |
| State: | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address P.O. Box 17464

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 23 | | 2013 |

| | | |
|-----------|-------|------------|
| City | State | Zip Code |
| Baltimore | MD | 21297-1464 |

Amount of Each Disbursement this Period

| |
|-------|
| 74.17 |
|-------|

Purpose of Disbursement
cell phone 8984Category/
Type**Transaction ID : 31103.E6468**

Candidate Name

CELL PHONE 8984

| | | |
|----------------|-----------|---|
| Office Sought: | House | Disbursement For: |
| | Senate | |
| | President | |
| State: | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

359.62

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 44

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address P.O. Box 17464

| | | |
|-----------|-------|------------|
| City | State | Zip Code |
| Baltimore | MD | 21297-1464 |

Purpose of Disbursement
cell phone 8984

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 11 / 20 / 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 68.68 |
|-------|

Transaction ID : 31126.E6496

CELL PHONE 8984

B. Verizon Wireless

Mailing Address P.O. Box 17464

| | | |
|-----------|-------|------------|
| City | State | Zip Code |
| Baltimore | MD | 21297-1464 |

Purpose of Disbursement
cell phone 8984

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 12 / 20 / 2013 |

Amount of Each Disbursement this Period

| |
|-------|
| 69.11 |
|-------|

Transaction ID : 31223.E6526

CELL PHONE 8984

C.

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) | |

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
|---------------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

137.79

22954.72

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 44

| | | | |
|---|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input checked="" type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

Full Name (Last, First, Middle Initial)

A. Khanh Tran

Mailing Address 7802 Strasburg Street

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 08 | | 2013 |

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Manassas | VA | 20109- |

Amount of Each Disbursement this Period

| |
|--------|
| 900.00 |
|--------|

Purpose of Disbursement
Refund of Contribution 9/30 deposit erro

010

Transaction ID : 31008.E6463

Candidate Name

Category/
Type

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

| | | |
|------|-------|----------|
| City | State | Zip Code |
| | | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For:

| | |
|--|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

| | | |
|------|-------|----------|
| City | State | Zip Code |
| | | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For:

| | |
|--|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

900.00

900.00

